## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

3822-09-01

| (Column 1) (Column 2)  |  |   |               |                                      |                    |                          |       | SMALL ENTITY TYPE  |                                     |         | OTHER THAN OR SMALL ENTITY |                        |  |
|--|--|---|---------------|--------------------------------------|--------------------|--------------------------|-------|--------------------|-------------------------------------|---------|----------------------------|------------------------|--|
| TOTAL CLAIMS   |  |   | 17            |                                      |                    |                          |       | RATE               | FEE                                 | ٦       | RATE                       | FEE                    |  |
| FOR  |  |   | NUMBER FILED  |                                      | NUMBER EXTRA       |                          |       | BASIC FE           | <del></del>                         | OR      |                            | 1                      |  |
| TOTAL CHARGEABLE CLAIMS  |  |   | // minus 20=  |                                      | *                  |                          |       | X\$ 9=             |                                     | OR      | X\$18=                     |                        |  |
| INDEPENDENT CLAIMS   |  |   | 3 minus 3 =   |                                      | *                  |                          |       | X43=               |                                     | OR      | X86=                       | ·                      |  |
| M  | JLTIPLE DEPE                                   | NDENT CLAIM P                             | RESENT        |                                      |                    |                          |       | +145=              |                                     | OR      | +290=                      | ·                      |  |
| * 11   | the difference                                 | e in column 1 is                          | less than z   | zero, enter "0" in column 2          |                    |                          | •     | TOTAL              |                                     | OR      | TOTAL                      | 770                    |  |
| CLAIMS AS AMENDED - PART II  |  |   |               |                                      |                    |                          |       |                    | •                                   |         | OTHER                      | THAN                   |  |
|  |  | (Column 1)                                | <del></del>   | (Column 2) (Column 3)                |                    |                          |       | SMALL ENTITY       |                                     |         | OR SMALL ENTITY            |                        |  |
| AMENDMENT A  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |               | HIGHE<br>NUME<br>PREVIO<br>PAID F    | BER<br>USLY        | PRESENT<br>EXTRA         |       | RATE               | ADDI-<br>TIONAL<br>FEE              |         | RATE                       | ADDI-<br>TIONAL<br>FEE |  |
|  | Total  | *   | Minus         | **                                   |                    | =                        |       | X\$ 9=             |                                     | OR      | X\$18=                     |                        |  |
| AME  | Independent                                    | * NTATION OF MI                           | Minus         | PENDENT                              | CLAIM              | =                        |       | X43=               |                                     | OR      | X86=                       |                        |  |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM                                       |  |   |               |                                      |                    |                          |       | +145=              |                                     | ÖR      | +290=                      |                        |  |
|  |  |   |               |                                      |                    |                          |       | TOTAL<br>DDIT. FEE |                                     | OR      | TOTAL<br>ADDIT. FEE        |                        |  |
|  |  | •   |               |                                      |                    |                          |       |                    |                                     |         |                            |                        |  |
| AMENDMENT B  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |               | HIGHE<br>NUMB<br>PREVIO<br>PAID F    | ER<br>USLY         | PRESENT<br>EXTRA         |       | RATE               | ADDI-<br>TIONAL<br>FEE <sup>-</sup> |         | RATE                       | ADDI-<br>TIONAL<br>FEE |  |
|  | Total  | *   | Minus         | **                                   | •                  | =                        |       | X\$ 9=             |                                     | OR      | X\$18=                     |                        |  |
|  | Independent                                    | *   | Minus         | ***                                  |                    | = .                      |       | X43=               | · .                                 |         | X86=                       |                        |  |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |               |                                      |                    |                          | ┞     | -                  |                                     | OR      |                            |                        |  |
|  |  |   |               |                                      |                    |                          |       | +145=              |                                     | OR      | +290=                      |                        |  |
|  |  |   |               |                                      |                    |                          |       | TOTAL<br>DDIT. FEE | ·                                   | OR ,    | TOTAL<br>DDIT. FEE         |                        |  |
|  |  |   |               |                                      | • •                |                          | ;     |                    |                                     |         |                            |                        |  |
| Ż ŀ  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |               | HIGHE<br>NUMBI<br>PREVIOL<br>PAID FO | ST<br>ER<br>JSLY   | (Column 3) PRESENT EXTRA |       | RATE               | ADDI-<br>TIONAL<br>FEE              |         | RATE                       | ADDI-<br>TIONAL<br>FEE |  |
|  | Total  | *   | Minus         | **                                   |                    | =                        | T     | X\$ 9=             |                                     | OR      | X\$18=                     |                        |  |
|  | Independent                                    | *   | Minus         | ***                                  |                    | =                        |       | X43=               |                                     |         | X86=                       |                        |  |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |               |                                      |                    |                          | -     | <del></del>        |                                     | OR      | 700-                       |                        |  |
| * If the ntry in column 1 is less than the entry in column 2, write "0" in column 3. |  |   |               |                                      |                    |                          |       |                    |                                     | OR      | +290=                      |                        |  |
| ** If  | the "Highest Num<br>the "Highest Num           | TOTAL<br>DIT. FEE                         |               | OR A                                 | TOTAL<br>DDIT. FEE |                          |       |                    |                                     |         |                            |                        |  |
| . Т  | he "High st Num                                | ber Previously Paid                       | For (Total or | Independen                           | t) is the l        | nighest number           | found | in thappi          | priat box                           | in colu | mn 1.                      |                        |  |